## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

638459

RATE   FEE   SASIC FEE   SAS			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY						
SASIC FEE   SASI	FOR		NUMB	NUMBER FILED		NUMBER EXTRA		FEE	7			
NOTAL CLAIMS	ВА	SIC FEE		A Company of the Company				345.00	OR		690.00	
MULTIPLE DEPENDENT CLAIM PRESENT  *If the difference in column 1 is less than zero, enter "0" in column 2  **CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  **CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  **CLAIMS AFTER PREVIOUSLY PARTON OF MULTIPLE DEPENDENT CLAIM  **FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  **Total  **COlumn 3)  **CLAIMS AFTER PREVIOUSLY PARTON OF MULTIPLE DEPENDENT CLAIM  **Total  **Total  **COlumn 3)  **CLAIMS AFTER PREVIOUSLY PARTON OF MULTIPLE DEPENDENT CLAIM  **Total  **Total  **COlumn 3)  **CLAIMS AFTER PREVIOUSLY PARTON OF MULTIPLE DEPENDENT CLAIM  **Total  **Total  **COlumn 3)  **CLAIMS AFTER PREVIOUSLY PARTON OF MULTIPLE DEPENDENT CLAIM  **Total  **Total  **COlumn 3)  **CLAIMS AFTER PREVIOUSLY PARTON OF MULTIPLE DEPENDENT CLAIM  **Total  **Total  **COlumn 3)  **CLAIMS AFTER PREVIOUSLY PARTON OF MULTIPLE DEPENDENT CLAIM  **Total  **Total  **COlumn 3)  **COlumn 3)  **COLUMN 3)  **COLUMN 4)  **COLUMN 4)  **COLUMN 5)  **COLUMN 6)  **COLUMN 6)  **COLUMN 7)  **COLUMN 6)  **COLUMN 7)  **COLUMN	то	TAL CLAIMS	20	) minus 2	20= *		1		OR	X\$18=		
**Suppose the content of the difference in column 1 is less than zero, enter "0" in column 2  **CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  **CLAIMS AS AMENDED - PART II (Column 3)  **CLAIMS AFTER PREVIOUSLY PART PART PART PART PART PART PART PART	INDEPENDENT CLAIMS 4 minus 3 = * 1				1	X39=	1	1	X78=	78 °°		
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   +130= OR ADDIT. FEE   TOTAL ADDIT. FEE			· 4	<u></u>	L	=	X39=		OR	X78=	_	
Column 1)   Column 2)   Column 3    CLAIMS   REMAINING   AFTER   AMENDMENT   PREVIOUSLY   PRESENT   EXTRA   PAID FOR   FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   FEE		FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDENT CLAIM		+130=			+260=		
Column 1)   Column 2)   Column 3)   Column 3    Column 4    Column 4    Column 5    Colu							TOTAL			TOTAL		
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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1	***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR ADDIT. FEEOR ADDIT. FEE										